Monthly Vital Statistics April 1998 Vol. 32 No. 2

Focus . . . 1997 Health Statistics

Missouri AIDS deaths dropped by more than half from 1996 to 1997, Dr. Maureen Dempsey, Director of the Missouri Department of Health, announced today. According to Dempsey, provisional 1997 statistics show a 52 percent decline in AIDS deaths from 339 deaths in 1996 to 163 in 1997. This represents a two thirds decrease in two years from the 1995 peak of 502 deaths to the lowest AIDS death rate in 10 years. (See Table 1).

"In 1995 AIDS was the 11th leading cause of death, but it no longer ranks among the 15 leading causes," Dempsey said. "This decline represents the lives of 339 Missourians."

"However, we must remember that preventing HIV infection in the first place is the real key to conquering AIDS," Dempsey added.

The AIDS mortality decline reflects a national trend. From 1995 to the first half of 1997, the national AIDS death rate decreased by 59 percent compared with a 62 percent decrease in Missouri during the same time period. Among persons in Missouri with AIDS, substantial mortality decreases occurred among all age, sex and race groups and all geographical areas from 1995 to 1997. However, declines were greater among white (74 percent) than among African-American (54 percent) deaths and among those with college educations (70 percent) than those without high school diplomas (61 percent).

Decreased AIDS mortality reflects improvements in the treatment of HIV-infected people, especially the increasing use of combinations of antiretroviral drugs that include protease inhibitors. For many infected individuals, the use of such therapies results in substantial decreases in the rate of disease progression. Better use of prophylactic medications that prevent or delay the onset of serious opportunistic infections is also a likely contributing factor.

The health department today also released statistics from 1997 on important indicators for healthy babies. According to Dr. Dempsey, the infant death rate in the state stabilized in 1997, with the same rate as in 1996 of 7.6 deaths per 1,000 live births. This number was only slightly up from the 1995 record low of 7.4 deaths per 1,000 live births. (See Table 2).

Regional variations continue to exist. Both St. Louis City and County experienced increases in the infant death rates in 1997 over the previous year. As Table 3 shows, the rate in St. Louis City increased from 12.4 to 14.4 deaths per 1,000 live births in 1997, while the St. Louis County infant death rate rose from 5.9 to 8.7 per 1,000 live births.

"It is important to interpret a single year's data with caution as trends over a longer time period are necessary for accurate interpretation. However, it is clear that we must continue to concentrate efforts on working with public health officials in St. Louis City and St. Louis County to identify the reasons for the high infant mortality rates and devise creative solutions to help mothers in these geographic areas have healthier babies," Dempsey said.

Table 2 shows the disparity between races increased for infant mortality and low birth weight in 1997. The 1997 African-American infant mortality rate of 16.3 per 1,000 live births was 2.7 times greater than the white rate of 6.1. This compares with a ratio of 2.5 in 1996 and 1.9 in 1987. The 1997 African-American low-birth-weight rate of 13.6 was 2.03 times greater than the white rate of 6.7, which is similar to the ratios of 1.98 in 1996 and 2.08 in 1987.

The St. Louis area infant mortality increases occurred for both white and African-Americans and Medicaid and non-Medicaid births. Most of the mortality increase occurred from an increase in the births of extremely small babies (under one pound, two ounces).

The rate of babies born with low birth weight (less than 5.5 pounds) increased in 1997 from 7.5 percent in 1996 to the highest level in nearly 30 years, 7.7 percent. This increase has been part of a fairly continuous upward trend since 1984 when the low-birth-weight rate was just 6.6 percent. According to Department of Health statisticians, almost half of the increase from 1984 to 1997 has been due to increasing multiple-birth deliveries, primarily associated with the use of fertility drugs. The reasons for the remainder of the increase in low-birth-weight babies remains unclear at this time.

There are two types of low-birth-weight infants, those delivered too early and those delivered at full-term, but born too small. Since 1984, there has been a greater increase in those born too early (34 percent) than those born too small (7 percent). This partly reflects the fact that babies being born too small is more preventable from behavioral changes such as improved diet or smoking-cessation.

The rate of inadequate prenatal care continued to decrease in 1997, reaching a record low 11.4 percent compared with a rate of 12.0 in 1996 and 16.5 percent in 1987. However, there is still a racial imbalance in the rates. The inadequate prenatal care rate among African-Americans decreased from 26.8 in 1996 to 24.4 percent in 1997, while the white rate decreased from 9.3 to 9.1 percent. The ratio between white and African-Americans for inadequate prenatal care thus decreased from 2.9 to 2.7.

In other statistics, abortions decreased in 1997 by nearly 5 percent from 13,989 in 1996 to 13,300. The 1996 count had briefly halted six consecutive years of decreases. Since 1987, abortions have decreased by 24 percent, from 17,518 that year. Other family planning indicators, out-of-wedlock births and mothers having babies less than 18 months apart, showed little change in 1997.

Other maternal and child health indicators showed the following in 1997:

Teen live births decreased by 2.1 percent from 10,477 to 10,260.

Smoking during pregnancy remained the same in 1996 and 1997, at 19.5 percent.

Births to mothers on Medicaid or food stamps decreased in 1997.

Total live births increased in 1997 from 73,733 to 73,940, representing the state's highest birth count since 1993.

Infant deaths due to Sudden Infant Death Syndrome (SIDS) increased from 82 in 1996 to 91 in 1997. From 1991 to 1995, SIDS deaths had declined by half from 150 to 75. The increase in SIDS is disturbing since many SIDS deaths are preventable if babies are placed on their backs when they go to sleep.

Overall mortality data show a slight increase in deaths from 53,766 in 1996 to 54,203 in 1997. But this primarily reflected on aging of the Missouri population as the life expectancy for Missourians reached a record high of 75.6 years in 1997, rising slightly from 75.5 in 1996. (See Table 4). Female life expectancy increased from 78.5 to 78.7 years while male life expectancy increased from 72.5 to 72.6 years, a record high.

The three leading causes of death (heart disease, cancer and stroke) showed little change from 1996 to 1997, with heart and cancer showing slight increases and stroke a small decrease. Three causes that showed fairly large increases were chronic obstructive pulmonary disease (4.6 percent increase), diabetes (7.6 percent) and motor vehicle crash deaths (4.5 percent). Chronic obstructive pulmonary disease is primarily related to smoking, increased diabetes mortality may be related to better reporting, and increased speed may have contributed to the motor vehicle crash death rate increase.

Notable decreases in mortality occurred for suicides (7.6 percent), homicides (6.9 percent) and childhood deaths aged 1-14 (9 percent). Septicemia and pneumonia and influenza mortality also declined slightly.

Table 1

Missouri Provisional 1997 Death Data for Annual News Release
(Including Comparisons with 1987 and 1996 Data)

Numbers					Rates per 100,000 Pop.				
	1987	1996	1997	1987	1996	1997			
			(Prov.)			(Prov.)			
Leading Causes of Death									
Heart	18,251	18,174	18,228	360.9	339.1	337.8			
Cancer	11,073	12,014	12,120	219.0	224.2	224.7			
Lung Cancer	3,288	3,687	3,767	65.0	68.8	69.9			
Stroke	3,768	3,866	3,844	74.5	72.1	71.3			
Chronic Pulmonary Disease	1,968	2,516	2,632	38.9	46.9	48.8			
Accidents	2,051	2,253	2,276	40.6	42.0	41.9			
Motor Vehicle	1,064	1,145	1,197	21.0	21.4	22.0			
Other	987	1,108	1,079	19.5	20.7	19.9			
Pneumonia & Influenza	1,734	2,179	2,173	34.3	40.7	40.3			
Diabetes	816	1,289	1,387	16.1	24.1	25.7			
Suicide	745	768	710	14.7	14.3	13.2			
Nephritis & Nephrosis	605	647	707	12.0	12.1	13.1			

Septicemia	418	500	489	8.3	9.3	9.1
Homicide	474	476	443	9.4	8.9	8.2
Liver Disease	404	408	433	8.0	7.6	8.0
AIDS	112	339	163	2.2	6.3	3.0
Tuberculosis	28	18	17	0.6	0.3	0.3
Maternal Deaths	7	12	7	9.4**	16.3**	9.4**

^{*}Per 1,000 live births

Table 2
Trends in Maternal and Child Health Statistics: Missouri 1987, 1996, 1997

Numbers					Rates	5
	1987	1996	1997	1987	1996	1997
			I	Rates per 1,000	Live Births	
Infant Deaths	767	558	562	10.2	7.6	7.6
White	551	381	373	8.9	6.2	6.1
Black	216	175	179	16.5	15.8	16.3
					Percent of Li	ve Births
Low Birth Weight	5,225	5,537	5,721	7.0	7.5	7.7
White	3,610	3,987	4,090	5.9	6.5	6.7
Black	1,615	1,426	1,493	12.3	12.9	13.6
Inadequate Prenatal Care	12,047	8,577	8,155	16.5	12.0	11.4
White	8,099	5,560	5,408	13.4	9.3	9.1
Black	3,948	2,763	2,476	31.0	26.8	24.4
Birth Spacing <18 mos.	5,397	4,413	4,500	12.5	10.7	10.8
Out-of-Wedlock Births	17,775	24,454	24,491	23.8	33.2	33.1
Teen (10-19) Births	9,985	10,477	10,260	13.3	14.2	13.9
Early Teen (10-17) Births	3,846	3,816	3,724	5.1	5.2	5.0
Smoking During Pregnancy	20,047	14,409	14,410	27.6	19.5	19.5
Medicaid Births	NA	29,423	28,838	NA	41.3	40.4
WIC Births	NA	29,604	29,711	NA	41.6	41.6
Food Stamp Births	NA	15,146	13,626	NA	21.3	19.1
Abortions	17,518	13,989	13,300			
Live Births	74,472	73,733	73,940			

Table 3
Resident Live Births, Infant Deaths and Rates per 1,000 Live Births by Race of

Mother by Selected Areas:

Missouri 1995, 1996 and 1997

	Total				Whit		Black		
	1995	1996	1997	1995	1996	1997	1995	1996	1997
LIVE BIRTHS									
St. Louis City	5,982	5,813	5,723	1,981	1,913	1,881	3,856	3,746	3,675
St. Louis County	13,343	13,090	12,939	9,949	9,688	9,441	3,010	3,000	3,093
Kansas City	6,710	6,881	6,975	4,032	4,080	4,190	2,415	2,533	2,488
Rest of State	46,769	47,949	48,303	44,372	45,300	45,675	1,704	1,810	1,730

^{**}Per 100,000 live births

Missouri Total	72,804	73,733	73,940	60,334	60,981	61,187	10,985	11,089	10,986
INFANT DEATHS									
St. Louis City	71	72	82	19	15	17	51	57	63
St. Louis County	86	77	112	48	33	58	37	44	50
Kansas City	66	79	62	24	30	24	42	48	37
Rest of State	316	330	306	293	303	274	20	26	29
Missouri Total	539	558	562	384	381	373	150	175	179
INFANT DEATH RATE									
St. Louis City	11.9	12.4	14.4	9.6	7.8	9.0	13.2	15.2	17.1
St. Louis County	7.4	5.9	8.7	5.5	3.4	6.1	12.3	14.7	16.2
Kansas City	9.8	11.5	8.9	6.0	7.4	5.7	17.4	18.9	14.9
Rest of State	6.8	6.9	6.3	6.6	6.7	6.0	11.7	14.4	16.8
Missouri Total	7.4	7.6	7.6	6.4	6.2	6.1	13.7	15.8	16.3

Table 4

Trends in Life	Evnactancias	(Voore) by C	andar: Micca	uri 1050_1007
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Year	Male	Female	Difference
1950	65.6	71.3	5.7
1960	66.9	73.6	6.7
1970	66.8	74.7	7.9
1975	68.4	76.4	8.0
1980	69.9	77.6	7.7
1985	71.2	78.3	7.1
1990	71.7	78.9	7.2
1991	71.5	78.9	7.4
1992	71.8	79.1	7.3
1993	71.6	78.7	7.1
1994	71.7	78.6	6.9
1995	71.8	78.6	6.8
1996	72.4	78.5	6.1
1997	72.5	78.7	6.2

Provisional Vital Statistics for February 1998

The **Live births** decreased slightly in February as 5,836 Missouri babies were born compared with 5,867 one year earlier. The birth rate decreased from 14.2 to 14.0 per 1,000 population for these two periods.

Cumulative births for the 12 months ending with February show a slight 1.1 percent increase from 72,746 to 73,542 live births.

Deaths increased in February as 4,993 Missourians died compared with 4,743 in February 1997. Deaths for the first two months of the year show a slight decrease.

The **Natural increase** for Missouri in February was 843 persons (5,836 births minus 4,993 deaths). The rate of natural increase decreased from 2.7 to 2.0 per 1,000 population.

Marriages increased in February while **Dissolutions of marriage** decreased, the opposite of the trend for the 12 months ending with February.

Infant deaths decreased in February from 61 in 1997 to 50. For the 12 months ending with February the infant death rate decreased from 8.1 to 7.7 per 1,000 live births.

PROVISIONAL RESIDENT VITAL STATISTICS FOR THE STATE OF MISSOURI

February						JanFeb. cumulative				12 months ending with February				
<u>Item</u>	<u>N</u>	<u>lumber</u>		Rate*		Number		Rate*	N	<u>umber</u>		Rate*		
	<u>1997</u>	<u>1998</u>	<u>1997</u>	<u>1998</u>	<u>1997</u>	<u>1998</u>	<u>1997</u>	<u>1998</u>	<u>1997</u>	<u>1998</u>	<u>1996</u>	<u>1997</u>	<u>1998</u>	
Live Births	5,867	5,836	14.2	14.0	13,009	11,970	15.2	14.1	72,746	73,542	13.8	13.5	13.6	
Deaths	4,743	4,993	11.4	12.0	10,467	10,245	12.2	12.1	54,313	54,616	10.2	10.1	10.1	
Natural increase	1,124	843	2.7	2.0	2,542	1,725	3.0	2.0	18,433	18,926	3.5	3.4	3.5	
Marriages	2,879	3,013	6.9	7.2	5,536	5,392	6.4	6.3	45,689	43,441	8.4	8.5	8.0	
Dissolutions	2,080	2,003	5.0	4.8	3,854	4,184	4.5	4.9	25,511	25,587	4.8	4.8	4.7	
Infant deaths	61	50	10.4	8.6	112	107	8.6	8.9	591	563	7.2	8.1	7.7	
Population base (in thousands)			5,359	5,395			5,402	5,440			5,332	5,370	5,408	

^{*}Rates for live births, deaths, natural increase, marriages and dissolutions are computed on the number per 1000 estimated population. The infant death rate is based on the number of infant deaths per 1000 live births. Rates are adjusted to account for varying lengths of monthly reporting periods.

Alternate forms of this publication for persons with disabilities may be obtained by contacting the Missouri Department of Health, Center for Health Information Management & Epidemiology/Bureau of Health Data Analysis, P.O. Box 570, Jefferson City, MO 65102; phone (573) 751-6278. Hearing impaired citizens telephone 1-800-735-2966.

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